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WESTERMAN, HATTORI, DANIELS & ADRIAN, LLP 1250 CONNECTICUT AVENUE NW - SUITE 700 WASHINGTON, D.C. 20036

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(Depositor's name) (Signature) (Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
09/842,683	April 27, 2001	Kazuharu MAEDA	010589	9047

TITLE OF INVENTION: AN INFORMATION PROVIDING SYSTEM AND A METHOD FOR PROVIDING INFORMATION

APPLN. TYPE SMALL I	ENTITY ISSUE FEE	PUBLICATION FEE DUE	PREV. PAID ISSUE FEE	IOTAL FEE(S) DUE	DATEDUE	
nonprovisional NO	\$1400	\$300	\$0	\$1700	03/22/2007	
EXAMINER Luke S. Wassum		UNIT CLASS-SUB 167 707-003				
1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). ☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. ☐ "Fee Address" indication (or :Fee Address" indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.		(1) the names of up or agents OR, altern (2) the name of a sir registered attorney of 2 registered patent a	2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.		1 WESTERMAN, HATTORI, 2. DANIELS & ADRIAN, LLP. 3.	

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type) PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

Komatsu Ltd.

Tokyo, Japan

Please check the appropriate assignee category or categories (will not be print	ted on the patent):
ta. The following fee(s) are enclosed:	4b. Payment of Fee(s):
☑ Issue Fee	A check in the amount of the fee(s) is enclosed.
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23 / To visite Order in or oppos	Deposit Account Number 50-2866 (enclose an extra copy of this form).
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This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

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